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01/03/2005

JOHN F. SALAZAR
MIDDLETON & REUTLINGER
2500 BROWN & WILLIAMSON TOWER
LOUISVILLE, KY 40202



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LYNN MINTON

(Depositor's name)

(Signature)

4/4/2005

(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/694,428	10/27/2003	John W. Ricken	ZM142/02001-DIV	3347

TITLE OF INVENTION: WASTE PROCESSING AND RECOVERY SYSTEM

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700	\$300	\$1000	04/05/2005

EXAMINER	ART UNIT	CLASS-SUBCLASS
FOELAK, MORTON	1711	210-510100

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.335).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

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2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,

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1. JAMES E. COLE

2. MIDDLETON REUTLINGER

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

DENSIIFIED SOLUTIONS, L.L.C.

(B) RESIDENCE (CITY AND STATE OR COUNTRY)

ELIZABETHTOWN, KENTUCKY

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

☒ Issue Fee☒ Publication Fee (No small entity discount permitted)☐ Advance Order - # of Copies 6

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☐ A check in the amount of the fee(s) is enclosed.☒ Payment by credit card. Form PTO-2038 is attached.☐ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature

JOHN F. SALAZAR

Date 4/1/2005

Typed or printed name

Registration No. 39,353

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FROM: John F. Salazar, Reg. No. 39,353 Date: April 4, 2005
(faxed by Lynn Minton, Paralegal)

TO: U.S. Patent and Trademark Office
Fax #703-746-4000

Re: Issue fee payment for U.S. Patent Application No. 10/694,428
Attorney Docket No. ZM142/02001-DIV

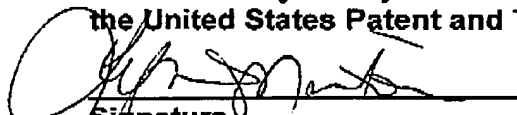
PAGES: 4 in total

This facsimile is in response to the Notice of Allowance, mailed on January 5, 2005.

1. Issue Fee Transmittal Form;
2. Transmittal Form;
3. Credit Card Payment Form – PTO-2038.

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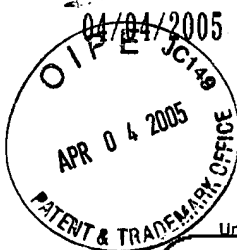
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Lynn Minton

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PTO/SB/21 (09-04)

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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/694,428
	Filing Date	10/27/2003
	First Named Inventor	RICKETT
	Art Unit	1711
	Examiner Name	FOELAK
Total Number of Pages In This Submission	Attorney Docket Number	ZM142/02001-DIV

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): FACSIMILE TRANSMITTAL FORM; ISSUE FEE TRANSMITTAL FORM
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	MIDDLETON REUTLINGER		
Signature			
Printed name	JOHN F. SALAZAR		
Date	4/1/2005	Reg. No.	39,353

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Signature			
Typed or printed name	LYNN MINTON	Date	4/4/2005

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